

Grand Canyon

National Park Service
U.S. Department of the Interior

Grand Canyon National Park
Arizona



Education Program Registration Form School Year 2002/03

Teacher Information

Your Name: _____

Work phone: _____

Home/cell phone (& best time to call):

_____ (optional)

Fax: _____

Email: _____

(Teachers are sometimes difficult to reach by phone. By providing your email address we can accommodate you better ☺)

School Information

Name: _____

Address: _____

Grade: _____

Number of Students: _____
(35 maximum)

Number of Chaperones: _____
(6:1 ratio required)

Program

- ♦ Dynamic Earth: _____
(grades 4, 5, 6)
- ♦ Discovery Pack: _____
(grades 4, 5, 6)
- ♦ A Walk Back in Time: _____
(grades 4, 5, 6)
- ♦ Other: _____
(please specify)

Preferred Program Dates

First consideration will be given to completed forms in the order they are received.

1st Choice: _____

2nd Choice: _____

3rd Choice: _____

Other comments or special circumstances:

Teacher

Workshop Dates: Nov. 1 – 3 _____ Nov. 22 - Nov. 24 _____ Jan. 31 – Feb. 2 _____
(Please record 1st, 2nd choices)

Return this form via mail or fax to:

SuZan Pearce, Environmental Ed. Specialist
Grand Canyon National Park
Environmental Education Program
P.O. Box 129
Grand Canyon, AZ 86023-0129
928-638-7776 (fax)
928-638-7762 (phone)

For official use only:

W

_____ Date Received

_____ Confirmation

_____ Hand Written Calendar

_____ Teacher WS

_____ On Computer Calendar

_____ Grant Info. sent

_____ Entered on Database

_____ Teacher Packet